

SFY 2011 Performance Contract Report/Data Submission Requirements
Fourth Quarter Report
April 1, 2011 - June 30, 2011

Report Submission Measures

LME	Number of Report Submission Measures Met	Total Number of Report Submission Measures *	Percent of Report Submission Measures Met	1. Quarterly Incident Report	3. SAJJ Initiative Quarterly Report	4. Work First Initiative Quarterly Report	5. System of Care Quarterly Report	17. SAPTBG Compliance Semi-Annual Report	18. National Core Indicators Consents, Pre-Surveys, and Mail Surveys
Alamance-Caswell	5	5	100%	★	★	★	★	★	★
Beacon Center	5	5	100%	★	★	★	★	★	★
CenterPoint	5	5	100%	★	★	★	★	★	★
Crossroads	5	5	100%	★	★	★	★	★	★
Cumberland	5	5	100%	★	★	★	★	★	★
Durham	5	5	100%	★	★	★	★	★	★
East Carolina Behavioral Health	5	5	100%	★	★	★	★	★	★
Eastpointe	5	5	100%	★	★	★	★	★	★
Five County	5	5	100%	★	★	★	★	★	★
Guilford	5	5	100%	★	★	★	★	★	★
Johnston	4	4	100%	N/A	★	★	★	★	★
Mecklenburg	5	5	100%	★	★	★	★	★	★
Mental Health Partners	4	4	100%	N/A	★	★	★	★	★
Onslow-Carteret	5	5	100%	★	★	★	★	★	★
Orange-Person-Chatham	5	5	100%	★	★	★	★	★	★
Pathways	4	5	80%		★	★	★	★	★
PBH	4	5	80%	★	★	★	★		
Sandhills Center	5	5	100%	★	★	★	★	★	★
Smoky Mountain	5	5	100%	★	★	★	★	★	★
Southeastern Center	5	5	100%	★	★	★	★	★	★
Southeastern Regional	5	5	100%	★	★	★	★	★	★
Wake	5	5	100%	★	★	★	★	★	★
Western Highlands	5	5	100%	★	★	★	★	★	★
STATEWIDE - Number			98%	0	20	23	23	23	22
STATEWIDE - Percent				0.0%	95.2%	100.0%	100.0%	100.0%	95.7%

Data Submission Measures

Number of Data Submission Measures Met	Percent of 9 Measures Met	6. CDW - Screening Record	8. CDW - ICD-9 Diagnosis	9. CDW - Unknown Data (Admissions)	10. CDW - Unknown Data (Discharges)	11. CDW - Identifying and Demographic Records	12. CDW - Drug of Choice	13. CDW - Episode Completion Records (SA Clients)	14. NC TOPPS - Initial	15. NC TOPPS - Update	16. NC-SNAP
8	89%	★	★	★	★	★	★	★			★
8	89%	★	★	★	★	★	★	★			★
8	89%	★	★	★	★	★	★	★			★
8	89%	★	★	★	★	★	★	★			★
8	89%	★	★	★	★	★	★	★			★
8	89%	★	★	★	★	★	★	★			★
8	89%	★	★	★	★	★	★	★			★
8	89%	★	★	★	★	★	★	★			★
8	89%	★	★	★	★	★	★	★			★
8	89%	★	★	★	★	★	★	★			★
8	89%	★	★	★	★	★	★	★			★
8	89%	★	★	★	★	★	★	★			★
8	89%	★	★	★	★	★	★	★			★
8	89%	★	★	★	★	★	★	★			★
9	100%	★	★	★	★	★	★	★		★	★
8	89%	★	★	★	★	★	★	★			★
8	89%	★	★	★	★	★	★	★			★
8	89%	★	★	★	★	★	★	★			★
7	88%	★	★	★	★	★	★	★			N/A
8	89%	★	★	★	★	★	★	★			★
8	89%	★	★	★	★	★	★	★			★
9	100%	★	★	★	★	★	★	★		★	★
8	89%	★	★	★	★	★	★	★			★
7	78%	★	★	★	★	★	★				★
8	89%	★	★	★	★	★	★	★			★
	89%	23	23	23	23	23	23	22	0	2	22
		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	95.7%	0.0%	8.7%	100.0%

- * This column shows the total number of **report submission** measures that apply this quarter. Some reports are due quarterly, one is due semi-annually, and several are due annually.
- ★ Indicates the LME met the performance standard for the measure.
- % Percents that are highlighted green indicate the LME met the performance standards for at least 65% of the measures in the respective category (e.g. report submission and/or data submission). Meeting the performance standards for at least 65% of the measures is one of the factors considered in LME monitoring decisions and single stream funding eligibility.